



MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS

DIVISION OF WORKERS' COMPENSATION

P.O. Box 58, Jefferson City, MO 65102-0058

**Guaranty To Satisfy Compensation Claims
Under Workers' Compensation Law of Missouri**

IN THE MATTER OF

_____, to
guarantee prompt and full payment of any and all of its liabilities under or by virtue of the Workers' Compensation Law
of Missouri.

KNOW ALL MEN BY THESE PRESENTS:

That the Undersigned, _____
a corporation organized and existing under and by virtue of the Laws of the State of _____
_____, being financially interested in the _____
_____, a corporation organized and existing under and by virtue of the Laws of
_____, and desiring to enable said _____
_____ to comply with the Laws of the State of Missouri, known
as "Workers' Compensation Law", in consideration of the granting of the right of self-insurance or to continue as a
self-insurer if authority has been granted under said Law to _____
_____, by the State of Missouri, Division of Workers' Compensation,
does hereby agree and guarantee on behalf of said _____
_____, that any and all liabilities against said _____
_____, under or by virtue of said "Workers' Compensation Law" will be
promptly and fully paid. This guarantee shall enure to the benefit of and may be enforced by the State of Missouri and any
and all employees or dependents of said _____
_____ having a claim or which may have a claim against it under said Law or

by the State of Missouri, Division of Workers' Compensation, as established by said Law, for the benefit of any such employee or employees or their dependents of said _____
_____.

IN WITNESS WHEREOF said _____
has caused this instrument to be signed by its president and its corporate seal to be hereunto affixed and attested by its secretary, this _____ day of _____, _____.

SIGNED: _____
Corporation

by: _____
President

(Seal)

Attest:

Secretary

STATE OF _____ (

)

COUNTY OF _____ (

On this _____ day of _____, _____, before me, personally came _____, to me known who, being duly sworn, did depose and say that he/she resides in _____, that he/she is _____
_____ of the _____

the corporation described in and which executed the foregoing instrument; that he/she knows the seal of the said corporation; that he/she knows the seal affixed to said instrument is such corporate seal, that it was affixed by the order of the Board of Directors of said corporation and that he/she signed his/her name thereto by like order.

WITNESS my hand and seal the day and year aforesaid.

Notary Public

My Commission expires: _____

(NOTARY SEAL)

This instrument must be accompanied by a certified copy of the resolution duly adopted by the Board of Directors (or stockholders) authorizing and directing the execution of this agreement.